

Foster Family Home - Corrective Action Report

Provider ID: 1-586977

Home Name: Abundia Tagaro, CNA

Review ID: 1-586977-4

92-522 Awawa Street

Reviewer: David Ayling

Kapolei HI 96707

Begin Date: 2/22/2019

Foster Family Home Required Certificate

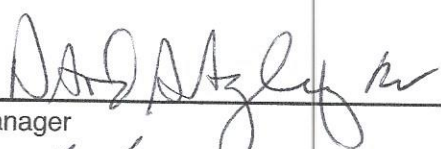
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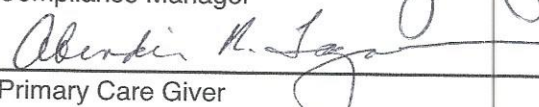
6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Inspection visit for a 3 person CCFFH recertification review made on 2/22/19.

6.(d)(1) - Home in compliance with all requirements. Home will receive a 3 bed certification.


Compliance Manager


Primary Care Giver

2/22/19
Date

2/22/19
Date